



MISSOURI DEPARTMENT OF HEALTH  
STATE PUBLIC HEALTH LABORATORY  
DATAMASTER MAINTENANCE REPORT

BREATH / ALCOHOL PROGRAM

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 201266 0105 S/N 2111 DATE OF INSPECTION 6-01-09

LOCATION OF INSTRUMENT (STREET AND CITY) 218 N. STATE Knob Noster TIME OF INSPECTION 1311

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

☒ COMPUTER

☒ DETECTOR

☒ PROGRAM

☒ FILTERS

☒ HEATERS SAMPLE CHAMBER 49 °C

☒ QUARTZ STANDARD

☒ FLOW DETECTOR

☒ CALIBRATION

☒ PUMP HIGH SPEED

☒ PRINTER

☒ INDICATOR LIGHTS OK

☒ TIME AND DATE OK

☒ SIMULATOR TEMPERATURE (34 °C ± 0.2 °C) 34.0 °C

☒ CALIBRATION CHECK - Pass

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 .097 TEST 2 .098 TEST 3 .098

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED) OK

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS 0 (0-.04) 0 (.05-.09) 1 (.10-.14) 1 (.15-.19) 3 (Over .19) 1

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

4-07-2009 Software chip  
Guth Labs .10% solution replaced.  
Harrisburg PA LOT. No. 08400  
EXP. DATE 12-08-09

INSPECTING OFFICER

SIGNATURE Brian C. Woods

PRINT NAME Brian C. Woods

TYPE II PERMIT NUMBER/EXPIRATION DATE

TELEPHONE NUMBER

720237 12-11-09

660-563-2233



## GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 08400 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1204 percent (w/vol) ethyl alcohol. The expiration date for this lot number is December 8, 2009 at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
KNOB NOSTER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201266  
06/01/09

TESTING OFFICER:

WOODS/B

OFFICER I.D.: 403

PERMIT NUMBER: 720237

EXPIRATION DATE: 12/11/09

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	13:23
INTERNAL STANDARD	VERIFIED	13:23
EXTERNAL STANDARD	.097	13:23
BLANK TEST	.000	13:24
EXTERNAL STANDARD	.098	13:24
BLANK TEST	.000	13:25
EXTERNAL STANDARD	.098	13:25
BLANK TEST	.000	13:26

N = 3

SIN. = .1

AVG. = .0976

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
KNOB NOSTER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201266  
06/01/09  
13:11

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS  
SAMPLE CHAMBER: 49c

FLOW DETECTOR: OKAY

PUMP  
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGH  
IJKLMNOPQRSTUVWXYZ[\]^\_`abcdefghijklmnopqrstuvwxyz{|}~

OPERATOR SIGNATURE

*Brian C. Woods*

Card Stock No.  
60021

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD OH 44901

FOR SIGNATURE

*Brian C. Woods*

ck No.

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
KNOB NOSTER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201266  
06/01/09

ARREST TIME: 13:11  
SUBJECT NAME:  
TEST  
DOB: 01/01/01 SEX: M  
STATE/D.L.: XX/123456  
ARRESTING OFFICER:  
XXX  
OFFICER I.D.: 111  
TESTING OFFICER:  
WOODS/B  
OFFICER I.D.: 403  
PERMIT NUMBER: 720237  
EXPIRATION DATE: 12/11/09  
MISCELLANEOUS DATA:  
TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	13:33
INTERNAL STANDARD	VERIFIED	13:33
SUBJECT SAMPLE	.000	13:33
BLANK TEST	.000	13:34

*5 seconds*

OPERATOR SIGNATURE

*Brian C. Woods*

Card Stock No.  
60021

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
KNOB NOSTER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201266  
06/01/09

ARREST TIME: 13:00  
SUBJECT NAME:  
RFI/TEST  
DOB: 01/01/01 SEX: M  
STATE/D.L.: XX/123456  
ARRESTING OFFICER:  
XXX  
OFFICER I.D.: 111  
TESTING OFFICER:  
WOODS/B  
OFFICER I.D.: 403  
PERMIT NUMBER: 720237  
EXPIRATION DATE: 12/11/09  
MISCELLANEOUS DATA:  
RFI/TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	13:29
INTERNAL STANDARD	VERIFIED	13:29
RADIO INTERFERENCE		

OPERATOR SIGNATURE

*Brian C. Woods*

Card Stock No.  
60021

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD OH 44901

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



BRIAN WOODS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

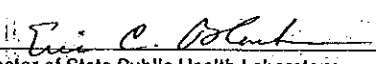
DATAMASTER

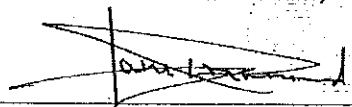
for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 12/11/07

Number 720237

Expires 12/11/2009

  
Director of State Public Health Laboratory

  
Director, Department of Health